

## Table of Contents.



Introduction	page 3
Overview	page 4
Mission + Values	page 5
Infrastructure, Administration, and Management	page 6
Economic Impact	page 12
Tobacco Tax Revenue	page 16
Adult Tobacco Data	page 20
Statewide Interventions	page 25
Cessation Interventions	page 28
Community Interventions	page 30
Youth Tobacco Data	page 32
Youth Programs	page 36
Mass Reach Health Communication Interventions	page 40
Enforcement	page 42
Protecting the Public	page 44
Surveillance + Evaluation	page 51
Appendix I: Tobacco Control Advisory Council	page 52
Appendix II: Mississippi Tobacco-Free Coalitions	page 53

## Introduction.

Since the publication of the Surgeon General's first report on smoking and health in 1964, smoking rates have significantly dropped in the United States (43 percent to 14 percent), and the general public has a much greater understanding of the dangers of tobacco use. Despite this progress, tobacco use continues to be the single most preventable cause of death, disability, and disease in this country. Emerging products like e-cigarettes entice youth to smoke and cause formerly quit adults to begin smoking again. This year alone, nearly 5,400 Mississippi adults will die prematurely because of smoking. More than 40 million Americans are tobacco dependent. Each day, more than 3,200 youth smoke their first cigarette. The annual economic costs due to tobacco exceed \$3 billion in Mississippi.

The CDC's Best Practices for Comprehensive Tobacco Control Programs - 2014 provides the framework for developing an evidence-based, comprehensive tobacco control program. The war against tobacco is a winnable battle, meaning that when fully funded and implemented, coordinated, sustained efforts can decrease smoking rates and reduce tobacco-related diseases and deaths. This comprehensive approach combines educational, clinical, regulatory, economic, and social strategies to establish smoke-free policies and norms, promote and assist tobacco users to quit, and prevent the initiation of tobacco use. When used together, these efforts increase the individual effectiveness of each strategy and the return on investment. According to the CDC, for every dollar spent on tobacco prevention, states can reduce tobacco-related health care costs by up to \$55. For this reason and many others, tobacco prevention and control activities are a public health "best buy" for the people of Mississippi.

## Overview.



In 2007, the Mississippi State Legislature responded to the growing health and financial crisis associated with tobacco use with definitive action by mandating a comprehensive statewide tobacco education, prevention, and cessation program in §41-113-1 of the Mississippi Code of 1972. Additionally, the Legislature established a 13-member Tobacco Control Advisory Council. (Appendix I).

The Mississippi Legislature recognizes the devastating impact that tobacco use has on the citizens of our state. Tobacco use is the single most preventable cause of death and disease in this country and this state. Each year, thousands of Mississippians lose their lives to diseases caused by tobacco use, and the cost to the state is hundreds of millions of dollars. Tobacco use is also a large burden on the families and businesses of Mississippi. It is therefore the intent of the Legislature that there be developed, implemented and fully funded a comprehensive and statewide tobacco education, prevention and cessation program that is consistent with the Best Practices for Comprehensive Tobacco Control Prevention, as periodically amended.

## Mission + Values.

#### **Mission**

The mission of the Office of Tobacco Control (OTC) is to promote and protect the health of all Mississippians by reducing tobacco-related disease and death. The Office of Tobacco Control accomplishes this mission by utilizing a systemic approach to tobacco prevention and control that focuses on evidence-based practices outlined in the Centers for Disease Control and Prevention's Best Practices for Comprehensive Tobacco Control Programs 2014, (CDC's Best Practices). Program components include:



- Infrastructure, Administration, and Management
- State and Community Interventions
- Cessation Interventions
- Mass-Reach Health Communication
- Surveillance and Evaluation



#### **Values**

- Smoke-free air is essential for all Mississippians.
- We respect the effort it takes to quit smoking and stay quit.
- We are committed to providing innovative leadership.
- We cultivate cooperative relationships with traditional and nontraditional partners.
- We do not accept funding from, or partner with, the tobacco industry.

## Comprehensive Tobacco Control Programs.



#### Infrastructure

Administration

**Management** 

The CDC's Best Practices recognizes that a strong internal capacity within a state *health department* is essential for program sustainability, efficacy, and efficiency.

The Office of Tobacco Control utilized the funds directly appropriated from the Tobacco Control Program Fund (\$9.13 million) in FY 2017 to reduce usage of tobacco products throughout the state. The Office of Tobacco Control's administration and management activities, in compliance with the CDC's Best Practices, include the following:



- Strategic planning to guide program efforts and resources
- Developing qualified and diverse technical, program, and administrative staff
- Awarding and monitoring program contracts and grants, coordinating implementation across program areas, and assessing grantee program performance
- Maintaining a real-time fiscal management system that tracks allocations and expenditure of funds
- Increasing capacity at the local level by providing ongoing training and technical assistance to local coalitions and partners
- Maintaining a comprehensive communication system
- Educating the public and decision makers on the health effects of tobacco and evidence-based program and policy interventions



# DEATHS IN MISSISSIPPI CAUSED BY SMOKING Adults who die each year from their own smoking 5,400 Kids now under 18 and alive in Mississippi who will ultimately die prematurely from smoking 68,000

Source: Campaign for Tobacco-Free Kids, 2017

Since 2007, Mississippi's Office of Tobacco Control (OTC) has worked to develop and implement evidence-based tobacco education, prevention, and cessation programs. Statewide tobacco control programs that are comprehensive, sustained, and accountable have been shown to reduce smoking rates and tobacco-related deaths and diseases. These initiatives operate with the following objectives:

#### **Objectives**

- Reduce the number of individuals who start using tobacco.
- Help current tobacco users quit.
- Promote a smoke-free environment to reduce adverse health effects of secondhand smoke.
- Address increasing youth smokeless tobacco prevalence.
- Identify and eliminate tobacco-related disparities among population groups.



#### In fiscal year 2016-2017, OTC oversaw the following programs and activities:

Mississippi Tobacco-Free Coalitions (MTFC's):

- 34 coalitions with a presence in each of the state's 82 counties
- Charged with providing awareness activities, advocacy and policy work, offering cessation assistance, programmatic activities, and communications for adults and youth in their service areas

#### Youth Programs:

- Administered through a grant provided to the Partnership for a Healthy Mississippi (PHM)
- Generation FREE activities in grades 7-12
- RAT Troupe shows for grades K-6
- Development and Implementation of youth conferences (IFLY and LEAD)

#### State Partners:

- Mississippi Academy of Family Physicians Foundation (MAFPF)
- Mississippi Chapter of the American Academy of Pediatrics (MSAAP)
- The Institute for Disability Studies (IDS)
- Mississippi Nurses Foundation (MNF)
- Mississippi Primary Health Association (MPRHA)

#### Mississippi Tobacco Quitline:

- Provides training and presentations in conjunction with state-wide partners and MTFC's
- Professional counselors evaluate and develop treatment plans for callers who phone the Quitline and/or use the web-based services

ACT Center for Tobacco Treatment, Education, and Research (ACT):

- Provides treatment including Nicotine Replacement Therapy (NRT) as well as non-nicotine medications.
- Professional counselors provide face-to-face cessation treatment
- Provides training and presentations in conjunction with state-wide partners and MTFC's

Research shows that the more states spend on comprehensive tobacco control programs, the greater the reductions in tobacco use. Additionally, the longer states invest in such programs, the greater and faster the impact.

## Appropriations.

From the tobacco settlement installment payments that the State of Mississippi receives during each calendar year, the sum of Twenty Million Dollars (\$20,000,000.00) shall be expended solely for the purposes specified in Section 2.a-f of 41-113-1 of the Mississippi Code of 1972. None of the funds in the special fund may be transferred to any other fund or appropriated or expended for any other purpose.

FY14	FY15	FY16	FY17	FY18	RECIPIENT
\$9,400,000	\$9,400,000	\$9,400,000	\$9,127,341	\$7,165,000	MSDH OTC
\$5,000,000	\$5,000,000	\$5,000,000	\$4,918,750	\$4,250,000	University of MS Medical Center Cancer Institute
				\$3,400,000	MS Qualified Health Center Grant Program
\$3,600,000	\$3,600,000	\$3,600,000	\$3,541,500	\$3,060,000	Mary Kirkpatrick Haskell-Mary Sprayberry Public School Nurse Program
\$800,000	\$800,000	\$800,000	\$787,000	\$680,000	MS Attorney General's Office of Alcohol and Drug Enforcement
\$700,000	\$700,000	\$700,000	\$688,625	\$595,000	University of MS Medical Center ACT Center
\$200,000	\$200,000	\$200,000	\$196,750	\$382,500	Myocardial Infarction Program (STEMI)
\$300,000	\$300,000	\$300,000	\$295,125	\$255,000	Skool ADS - School Poster Program (62 schools)
				\$212,500	MS Health Care Alliance for the Stroke System of Care Plan

Source: 41-113-1 of the Mississippi Code of 1972



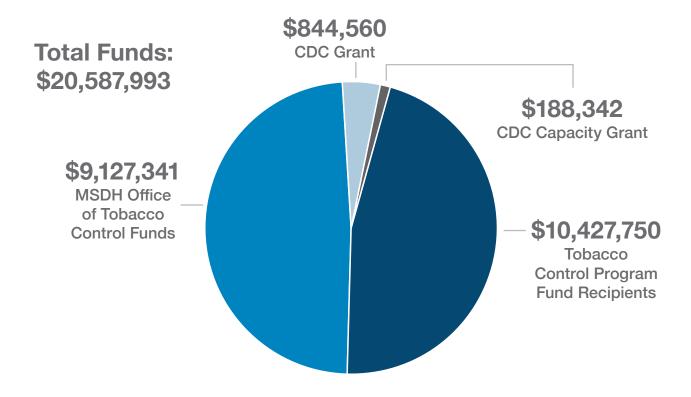
• In FY 2017, *Mississippi ranked 16th* among all • states in the funding of tobacco prevention programs.

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- In each of the five fiscal years that tobacco control has been charged to the MSDH Office of Tobacco Control, the Mississippi State Legislature has appropriated \$20 million from the Tobacco Control Program Fund.
- Additionally, the state received funding from the Centers for Disease Control and Prevention as follows:

1 1 1

- \$844,560 CDC Core Grant funding was used to prevent initiation of tobacco use by youth, to promote cessation, to eliminate tobaccorelated disparities, and to reduce exposure to secondhand smoke.
- \$188,342 CDC Capacity Grant funding was utilized to increase access to Mississippi Tobacco Quitline services and ensure that every participant received services. The activities included hiring and training qualified Quitline staff to ensure adequate coverage for all participants during peak hours of operation.



#### **TOBACCO CONTROL FUNDING (IN \$ MILLIONS)**

Per Capita Funding	Health Communication	Cessation Interventions	State & Community	Surveillance & Evaluation	Administration & Management
CDC Best Practices, 2017 Recommendations	\$1.37	\$5.06	\$4.19	\$1.06	\$0.53
MS Tobacco Control Program fund FY 2017	\$0.00	\$0.83	\$1.61	\$0.34	\$0.34

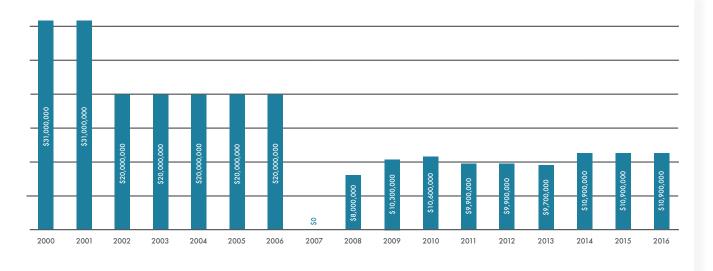
During FY 2017, total tobacco funding from federal and state sources was \$20,587,993 in Mississippi. While \$20 million was appropriated for tobacco control, only \$9.13 million was available to the MSDH Office of Tobacco Control to implement an evidence-based comprehensive tobacco program. The Centers for Disease Control recommends \$36.5 million based on the CDC *Best Practices*.

## Economic Impact.

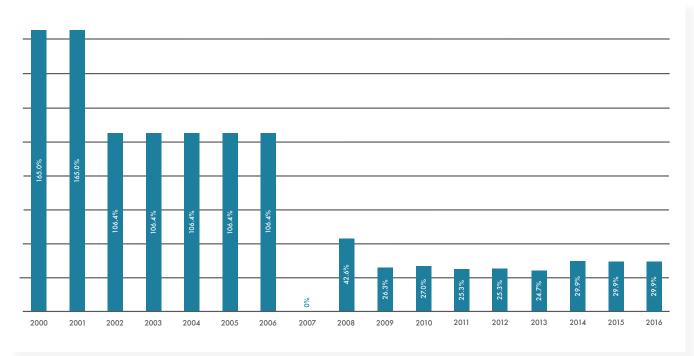


#### SPENDING FOR TOBACCO CONTROL TRENDS

#### ANNUAL STATE SPENDING FOR TOBACCO PREVENTION FOR MS | 2000-2016



#### PERCENT OF CDC MINIMUM RECOMMENDED FUNDING | 2000-2016



Source: Campaign for Tobacco-Free Kids



#### **ANNUAL ECONOMIC BURDEN**

Healthcare costs in Mississippi directly caused by smoking

Portion covered by the state Medicaid program

Residents' state & federal tax burden from smoking-caused government expenditures

Smoking-caused cost to Mississippi businesses: lost productivity

\$1.23 billion

\$319.7 million

\$1,031 per household

\$1.80 billion

Source: Campaign for Tobacco-Free Kids, 2017

## Economic Impact.



## Medicaid Costs Secondhand Smoke

	ATTRIBUTABLE POPULATION RISK	TOTAL COSTS	COSTS ATTRIBUTABLE TO EXPOSURE TO SECONDHAND SMOKE
POPULATION - BIRTH TO AGE 17			•
LOW BIRTH WEIGHT CODES -	18.0%	\$95.240.444	¢15 242 290
ICD CODES THAT BEGIN WITH 765	10.0 /0	\$85,240,444	\$15,343,280
ACUTE LOWER RESPIRATORY ILLNESS			
(BIRTH TO AGE 5 ONLY) - ICD CODES	25.0%	\$28,551,853	\$7,137,963
THAT BEGIN WITH 480-488, 466			• • •
OTITIS MEDIA AND MIDDLE EAR EFFUSION -	14.0%	¢14 501 001	¢2 210 244
ICD CODES THAT BEGIN WITH 382	14.0%	\$16,501,901	\$2,310,266
ASTHMA - ICD CODES THAT BEGIN WITH 493	35.0%	\$28,344,206	\$9,920,472
	•		0
POPULATION - AGES 18+			
HEART ATTACKS AND OTHER HEART DISEASES -	6.9%	\$12,149,244	\$838,298
ICD CODES THAT BEGIN WITH 410	0.7 /0	\$12,147,244	Ş030,270
LUNG CANCER - ICD CODES	4.9%	\$12.204.424	\$500.027
THAT BEGIN WITH 162	<b>4.7</b> %	\$12,204,636	\$598,027
	•	\$182,992,284	\$36,148,306

DATES OF SERVICE: 07/01/2012 - 06/30/2013

SPECIFIED DIAGNOSIS PRESENT IN EITHER THE PRINCIPLE
DIAGNOSIS FIELD OR OTHER DIAGNOSIS CODES 1-4 POSITIONS



- According to the U.S. Surgeon General, our nation's leading authority on health, the scientific
  evidence indicates that there is no risk-free level of exposure to secondhand smoke and eliminating
  smoking in indoor spaces fully protects nonsmokers from exposure to secondhand smoke.
- Most Mississippi adults support a statewide law in Mississippi prohibiting smoking in most public
  places, including workplaces, offices, restaurants, and bars (77.3%), while only 14.7% oppose
  such a law.
- Moreover, a recent survey of Mississippi restaurant owners and managers found that 69.9% of restaurateurs support this law, while less than 20 percent (18.7) oppose.

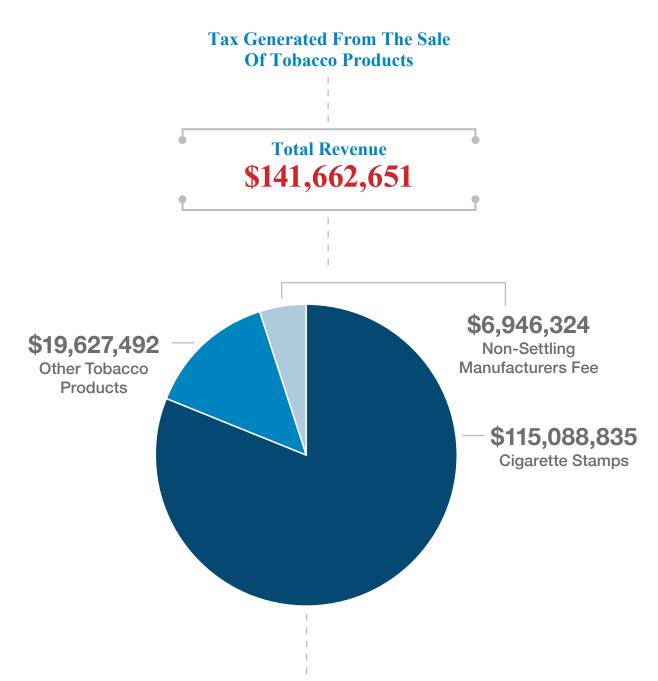
Source: 2014 Medicaid Costs & Secondhand Smoke Factsheet | Mississippi Tobacco Data

## Economic Impact.



## Tobacco Tax Revenue.

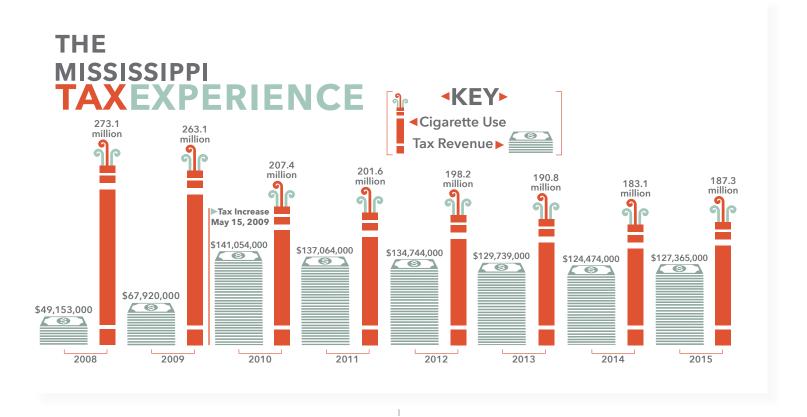




- \$115,088,835 from cigarette stamps (Cigarette stamps are purchased by wholesalers.)
- \$19,627,492 from other tobacco products (Excluding cigarettes.)
- \$6,946,324 from non-settling manufacturers fee (Fee covers tobacco manufacturers that were not part of the master settlement.)

## Tobacco Tax.

• Increasing tobacco tax decreases cigarette use and increases tax revenue. •



These data from tax records clearly demonstrate that following the 2009 increase in the state cigarette tax, the number of packs of cigarettes sold in Mississippi decreased by more than 30%, while tax revenue from cigarette sales almost tripled.

## Tobacco Tax.



## State Cigarette Excise Tax

- rates & rankings: 2017



Mississippi ranks 38th, with 37 states placing a higher state tax on cigarettes. Moreover, the 68 cent tax in Mississippi is substantially lower than the average state cigarette tax of \$1.69.

#### SOURCE

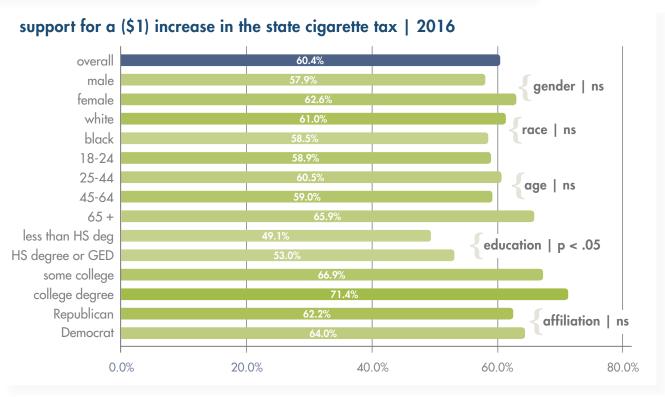
State Cigarette Excise Tax Rates and Rankings, Campaign for Tobacco-Free Kids, 2017

RANK	STATE	CIGARETTE TAX
1	NEW YORK	\$4.35
2	CONNECTICUT	\$3.90
3	RHODE ISLAND	\$3.75
4	MASSACHUSETTS	\$3.51
5	HAWAII	\$3.20
6	VERMONT	\$3.08
7	MINNESOTA	\$3.04
8	WASHINGTON	\$3.025
9	CALIFORNIA	\$2.87
10	NEW JERSEY	\$2.70
11	PENNSYLVANIA	\$2.60
12	WISCONSIN	\$2.52
13	ALASKA	\$2.00
	ARIZONA	\$2.00
	MAINE	\$2.00
	MARYLAND	\$2.00
	MICHIGAN	\$2.00
18	ILLINOIS	\$1.98
19	NEVADA	\$1.80
20	NEW HAMPSHIRE	\$1.78
21	MONTANA	\$1.70
	UTAH	\$1.70
23	NEW MEXICO	\$1.66
24	DELAWARE	\$1.60
	OHIO	\$1.60
26	SOUTH DAKOTA	\$1.53
27	TEXAS	\$1.33
28	IOWA	\$1.41
		\$1.36
30	FLORIDA OREGON	\$1.32
31	KANSAS	\$1.32
32		\$1.29
33	WEST VIRGINIA ARKANSAS	\$1.20
34		\$1.08
35	LOUISIANA	
	OKLAHOMA	\$1.03
36	INDIANA	\$0.995
37	COLORADO	\$0.84
38	MISSISSIPPI	\$0.68
39	ALABAMA	\$0.675
40	NEBRASKA	\$0.64
41	TENNESSEE	\$0.62
42	KENTUCKY	\$0.60
	WYOMING	\$0.60
44	IDAHO	\$0.57
	SOUTH CAROLINA	\$0.57
	NORTH CAROLINA	\$0.45
47	NORTH DAKOTA	\$0.44
48	GEORGIA	\$0.37
49		\$0.30
47	VIRGINIA	\$0.30



## Tobacco Tax.





Source: 2016 Mississippi Social Climate Survey of Tobacco Control | Mississippi Tobacco Data



## Current Smoking

cigarette smoking among adults: 2016

RANK	STATE	PREVALENCE	LOWER CI	UPPER CI
1	WEST VIRGINIA	24.8%	23.6%	26.1%
2	KENTUCKY	24.5%	23.1%	25.8%
3	ARKANSAS	23.6%	21.3%	25.8%
4	LOUISIANA	22.8%	20.8%	24.8%
5	MISSISSIPPI	22.7%	21.0%	24.5%
6	ОНЮ	22.5%	21.3%	23.8%
7	MISSOURI	22.1%	20.5%	23.8%
	TENNESSEE	22.1%	20.5%	23.7%
9	ALABAMA	21.5%	20.2%	22.9%
10	INDIANA	21.1%	20.0%	22.3%
11	MICHIGAN	20.4%	19.4%	21.4%
12	SOUTH CAROLINA	20.0%	18.9%	21.2%
13	MAINE	19.8%	18.4%	21.1%
	north dakota	19.8%	18.3%	21.2%
15	OKLAHOMA	19.6%	18.2%	21.0%
16	WYOMING	19.0%	17.0%	20.9%
	ALASKA	19.0%	16.8%	21.3%
18	MONTANA	18.5%	17.0%	20.0%
19	SOUTH DAKOTA	18.1%	16.3%	20.0%
20	PENNSYLVANIA	18.0%	16.7%	19.2%
	NEW HAMPSHIRE	18.0%	16.4%	19.6%



Mississippi ranks 5th among the 50 states and Washington D.C. in the prevalence of current smoking among adults. State rankings, however, should be interpreted with caution. Rank differences do not necessarily reflect meaningful differences between states.

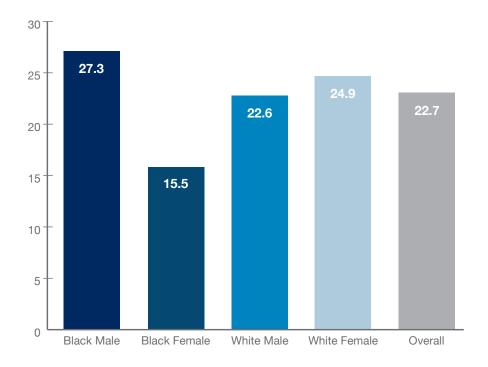
#### SOURCE

2016 Behavioral Risk Factor Surveillance System, Centers for Disease Control and Prevention



(Adults)

## Current Cigarette Use by Race + Gender

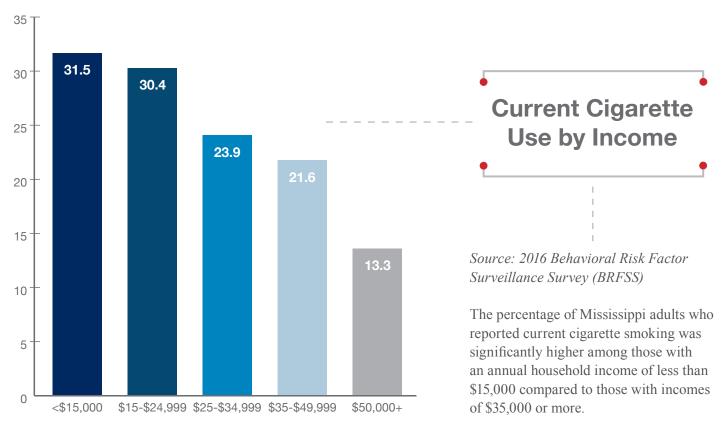


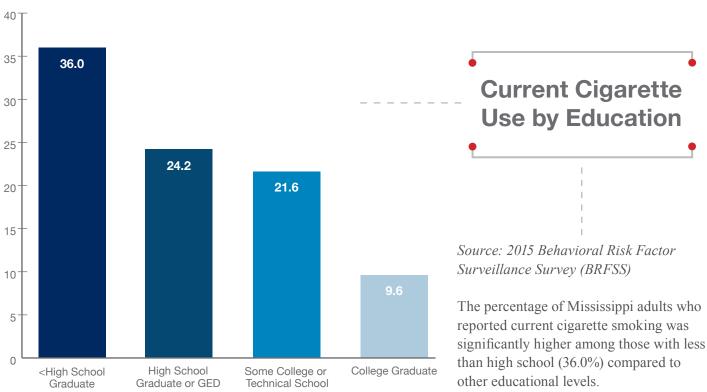
Source: 2016 Behavioral Risk Factor Surveillance Survey (BRFSS)

The percentage of Mississippi adults who reported being current smokers was significantly higher among black males (27.3) compared to other gender and race groups, and the percentage among black females (15.5%) was significantly lower compared to their counterparts.



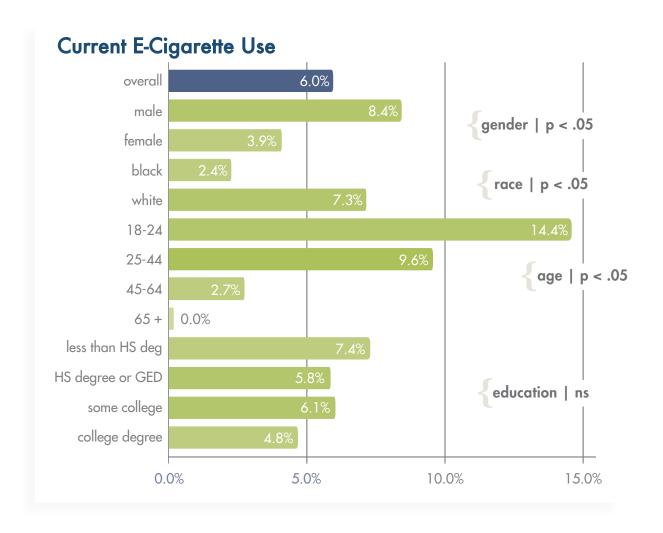
(Adults)





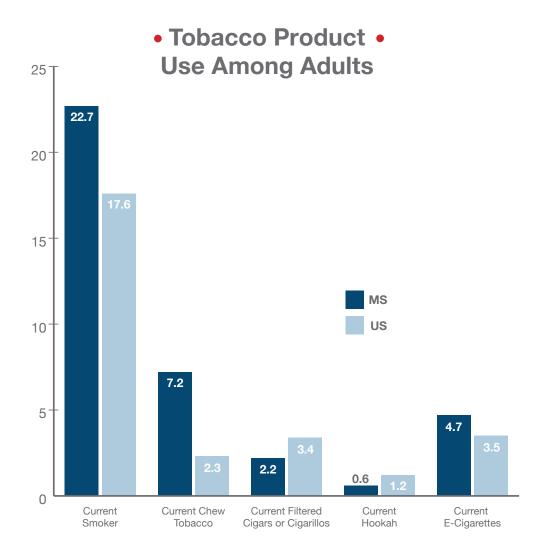


(Adults)



Source: 2016 Mississippi Social Climate Survey of Tobacco Control





Source: 2016 Behavioral Risk Factor Surveillance Survey (BRFSS), 2016 Mississippi Social Climate Survey of Tobacco Control, 2015 CDC Morbidity and Mortality Weekly Report (MMWR)



## Statewide Interventions.

8,389 people impacted

The CDC's Best Practices recommend that state programs provide funding to organizations that can effectively reach, involve, and mobilize identified specific populations. The Office of Tobacco Control provides funding for several health-related organizations to increase the number of Mississippians receiving tobacco control messages and services through their healthcare providers, staff, and related programs.

66 Tobacco cessation more than doubles when evidence-based intervention programs are utilized. 33

## **Engaging Mississippi's Family Physicians**

Family physicians have real power in the fight against tobacco, smoking, and nicotine.

- At least 70% of people who use tobacco products in the United States see a physician each year.
- Approximately 42,000 lives could be saved, if physicians would advise 90% of smokers to quit, and offer them medication or other assistance.

Source: www.aafp.org

Studies have shown that physicians and their staffs can be trained to successfully deliver office-based smoking cessation interventions and that these interventions significantly improve smoking cessation rates. The Office of Tobacco Control provides funding to the Mississippi Academy of Family Physicians Foundation (MAFPF) to train physicians on providing tobacco dependency training, effectively distributing educational literature on tobacco use and secondhand smoke. The OTC also offers technical support on project objectives. The project has impacted 43 family physician clinics.

Mississippi Academy of Family Physicians Foundation

85 education, awareness activities, chart reviews, technical assistance/2,143 people impacted with over 17,000 items distributed



#### The Mississippi Chapter Of The American Academy Of Pediatics (MSAAP)

The Office of Tobacco Control provided funding to the Mississippi Chapter of the American Academy of Pediatrics (MSAAP) to administer the Tobacco-Free Mississippi: Engaging Mississippi's Pediatricians project. The overall goal of this project was to implement the Public Health Service Guidelines for Treating Tobacco Use and Dependence recommendations in pediatric practice in Mississippi.

#### The Mississippi Chapter of the American Academy of Pediatrics

61 continuing education presentations, trainings, Lunch and Learns, community advocacy/ 567 people impacted with over 16,000 items distributed

#### The Mississippi Primary Healthcare Association

60 awareness,
capacity building,
chart reviews,
Lunch and Learn,
cessation promotions/
274 people impacted
with over 1,200 items
distributed

#### The Mississippi Primary Health Care Association (MPHCA)

The Office of Tobacco Control provided funding to the Mississippi Primary Health Care Association (MPHCA) to administer the Tobacco-Free Mississippi: Engaging Federally Qualified Health Centers project. The MPHCA engaged Federally Qualified Health Center (FQHC) clinicians to conduct clinical tobacco cessation programs and activities, as recommended by the CDC's Best Practices. Because many FQHCs serve low-income populations with limited medical resources, these centers are able to enhance access to cessation services and mitigate barriers for tobacco control interventions among disparate populations. Through MPHCA, the Tobacco-Free Mississippi Project has the potential to impact more than 120 primary care sites and over 300,000 Mississippians.

66 I look at my work as planting seeds. Those seeds are planted in the hearts and minds of our Tobacco Champions and Co-Champions, the front-line responders in the fight to educate, motivate and empower tobacco users to quit. If I can keep the work and the challenge before them, then they will keep it before our patients.

WAYNE MILEY | MISSISSIPPI PRIMARY HEALTHCARE ASSOCIATION



#### **Engaging Mississippi's Nurses**

"If the 3.6 million working nurses in the U.S. each helped one person per year quit smoking, nurses could greatly increase the U.S. quit rate."

— American Nurses Association

Nurses are uniquely provided with the opportunity to intervene in a patients' tobacco use, due to the fact that they are on the front lines working with and interacting with patients daily. The Office of Tobacco Control funded the Mississippi Nurses Foundation (MNF) to train nursing instructors at colleges and universities throughout Mississippi on tobacco control and tobacco cessation programs in nursing curriculums and to provide cessation resource information to nurses who use tobacco.

#### The Mississippi Nurses Foundation

133 awareness and programmatic activities and trainings - 642 people impacted with over 40,021 items distributed

# The University of Southern MS Institute for Disability Studies IDS

90 monthly education classrooms, leadership meetings, community expos/ 4,763 impacted with over 38,000 items distributed

#### **Tobacco Control Strategies For Mississippians With Disabilities**

People with serious mental illness treated in the public health system die a startling 25 years earlier than those without mental illness. Tobacco-related illnesses including cancer, heart disease and lung disease are among the most common causes of death in this population. Adults with disabilities are more likely to be cigarette smokers than those without disabilities. In 2016, the prevalence of current cigarette smoking among adults with disabilities was 35.7% compared with 19.4% among adults with no disability. The Office of Tobacco Control funded the Institute for Disability Studies (IDS) at the University of Southern Mississippi to implement a tobacco control program to reduce the initiation of tobacco use, promote cessation, eliminate exposure to secondhand smoke, and lessen tobacco-related disparities among Mississippians with disabilities.

## Cessation Interventions.



#### Mississippi Tobacco Quitline

The Mississippi Tobacco Quitline, 1-800-QUITNOW provides free telephone and web-based treatment to adult Mississippi residents. The CDC's Best Practices recommendations for tobacco cessation interventions clearly outline the importance of quitlines. In FY 2017, the Mississippi Tobacco Quitline received 13,577 calls for treatment (MS Tobacco Quitline, 2017).

The Office of Tobacco Control provides funding for Information and Quality Healthcare (IQH) to provide services for individuals who wish to utilize the Mississippi Tobacco Quitline. Masters-level professional counselors evaluate and develop a treatment plan with callers. Services that callers receive include access to Nicotine Replacement Therapies, routine behavior change therapy with an assigned counselor, referrals to physicians with experience in tobacco cessation counseling, and/or referrals to the nearest ACT Center for Tobacco Treatment, Education and Research.

A Spanish Quitkit was developed and made available for those callers whose first language is Spanish and who wish to receive all information and counseling in Spanish. The MS Quitline collaborated with the MSDH Office of Tobacco Control and Office of Communications to implement media promotions of Quitline services via television, social media, and specialty media.

#### The Act Center For Tobacco Treatment, Education and Research

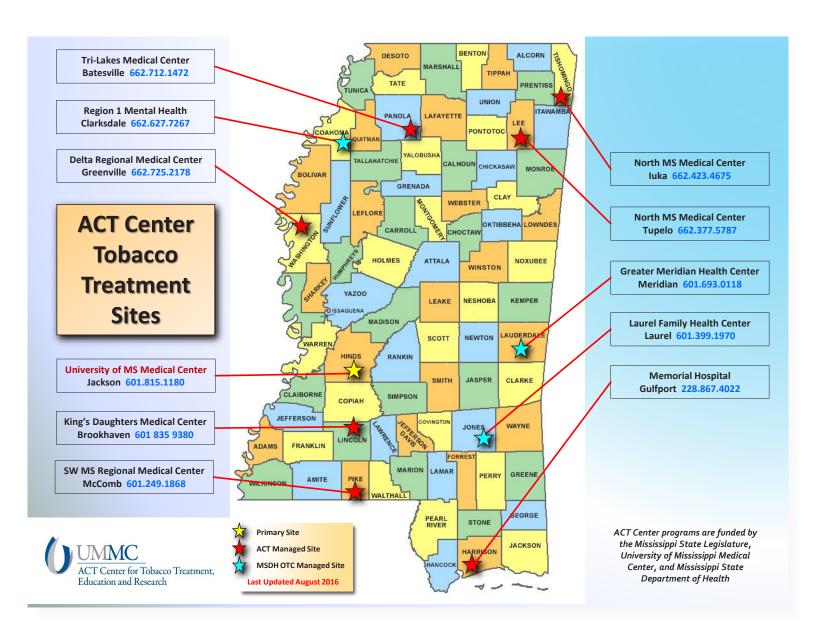
A program of the University of Mississippi Medical Center in Jackson, Mississippi, the ACT Center provides intensive treatment including Nicotine Replacement Therapy (NRT) and non-nicotine medications to Mississippi residents interested in quitting tobacco. Through funds provided by the Office of Tobacco Control, the ACT Center subcontracts with hospitals throughout the state for satellite tobacco treatment clinics (Appendix IV). In FY 2017, approximately 1,543 Mississippi residents participated in the intensive tobacco treatment program provided by the ACT Center.

Tobacco use is not only a strong behavior, but a very well-defined addiction to nicotine. Our program allows those who are ready to quit to have an option of treatment that individualizes the treatment plan, uses qualified counselors and support to help them make a solid attempt at quitting. It is important for callers to know that we are a tobacco cessation treatment program that happens to be telephonic or online - we are not a crisis line or a tip line.

It is real treatment.

PAMELA LUCKETT DIRECTOR OF THE MS TOBACCO QUITLINE





## Community Interventions.





#### **Mississippi Tobacco Free-Coalitions**

The Office of Tobacco Control (OTC) and its partners work with the Mississippi Tobacco-Free Coalitions (MTFCs) to educate citizens - both young and old - on the dangers of tobacco use. The OTC provides funding to 34 MTFCs that work in all 82 Mississippi counties to implement tobacco control programs at the grassroots level (Appendix III).

#### **Each MTFC:**

- Conducted tobacco control programmatic and awareness activities throughout the year that contain messages for youth and adults
- Worked to increase tobacco-free policies in municipalities statewide
- Promoted the use of tobacco prevention curricula in schools throughout the state



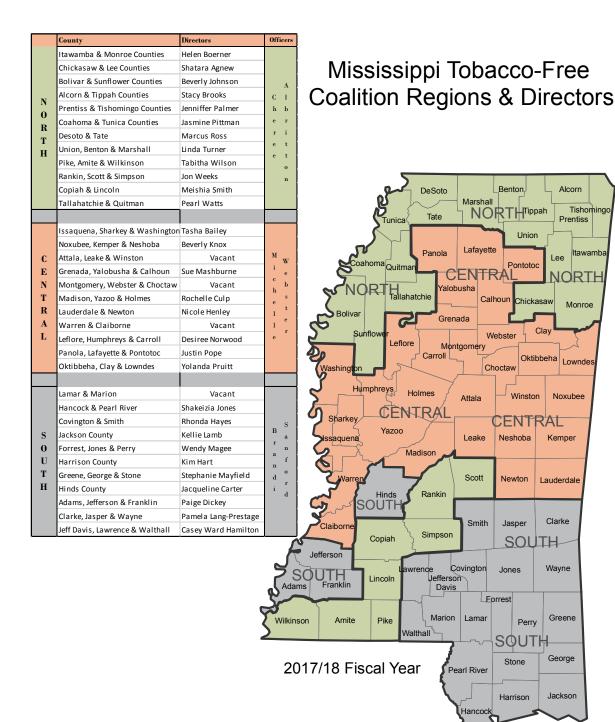
Mississippi Tobacco Free Coalitions (MTFC's) Fiscal Year 2016-2017 347,061 people impacted (154,333 adults; 192,728 children)

- 34 MTFC's with a presence in each of the 82 counties
- 2,935 General Awareness presentations/activities with 210,013 people in attendance
- 1,609 Advocacy and Policy activities with 38,386 people impacted
- 902 Cessation activities with 14,704 adults impacted
- 18 Smoke-Free Ordinances passed (14 Comprehensive, two e-cigarette Amendments, one Partial, and one smoke-free Vehicle (with minors) totaling 51,376 residents impacted
- 1 Community College went smoke-free this year (Meridian)

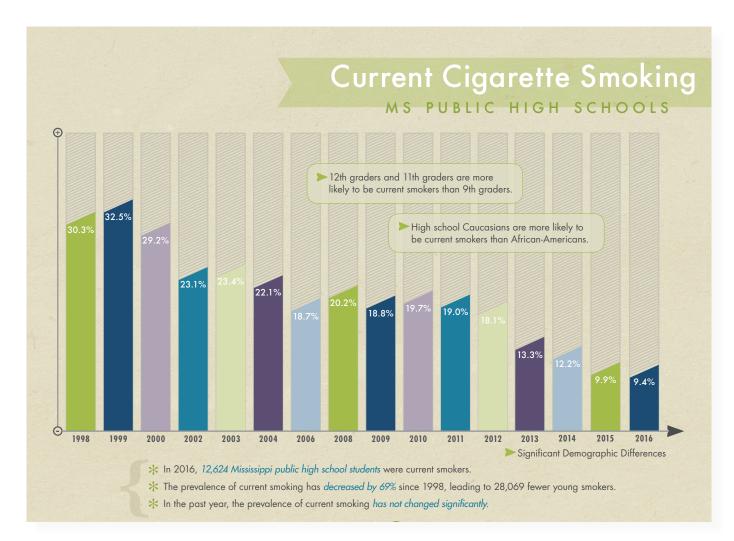
Collectively, the MTFC's directly impacted 282,982 Mississippians through their work with youth teams (72,969) and awareness activity presentations/activities (210,013) alone. Some of the activities include but are not limited to:

Awareness Presentations 2,935 events with 210,013 people in attendance; Health Fairs; Field Days; School/teacher orientations; RAT jeopardy with youth; Sawmill Festival; Watermelon Festival; Open House; Tobacco information disseminated; Second hand smoke presentations; Church events, etc.

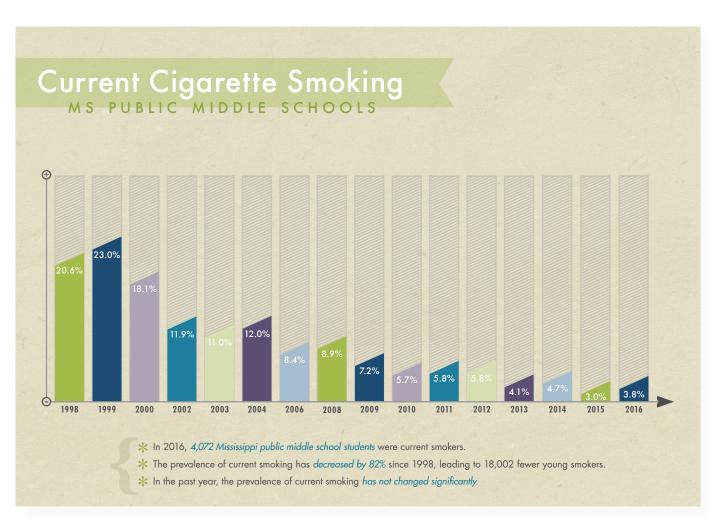
Source: 2017 Annual State Tobacco Prevention and Control Evaluation Report | Mississippi Tobacco Data



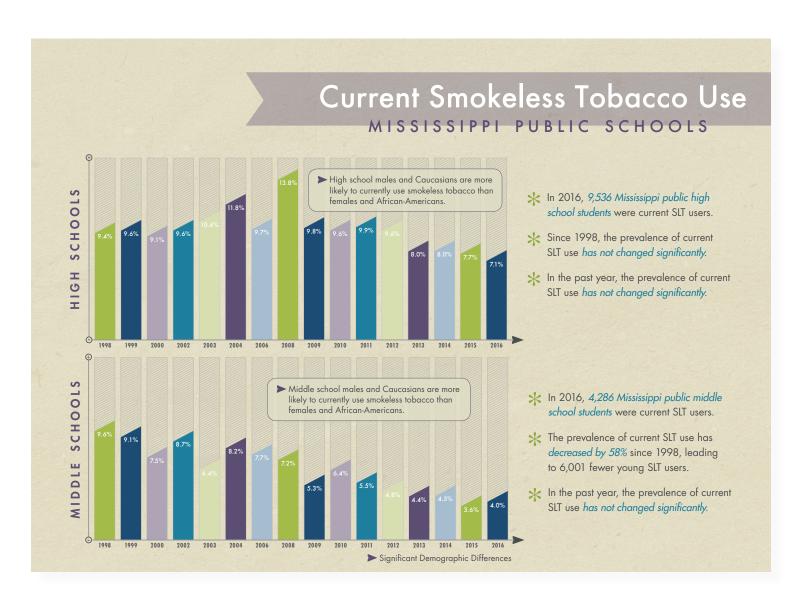
Prepared by: Mississippi Tobacco Data Evaluation Team, Mississippi State University; Social Science Research Center



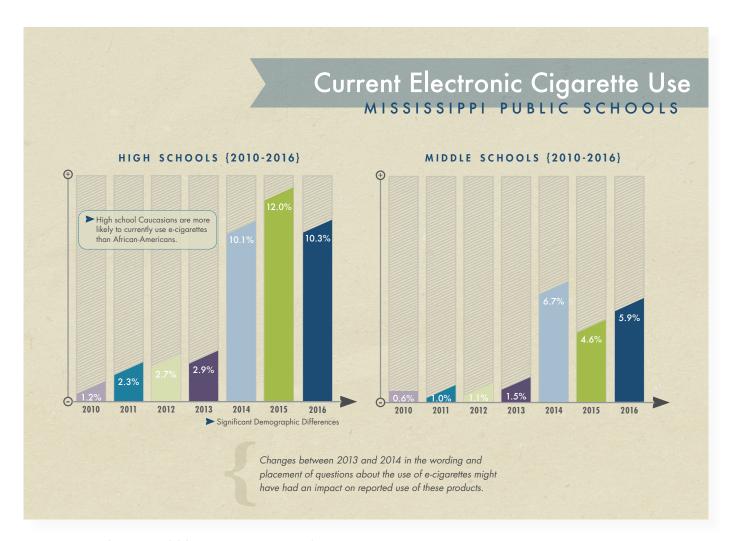
Source: 2017 Youth Tobacco Survey Data Book | Mississippi Tobacco Data



Source: 2017 Youth Tobacco Survey Data Book | Mississippi Tobacco Data



Source: 2017 Youth Tobacco Survey Data Book | Mississippi Tobacco Data



Source: 2017 Youth Tobacco Survey Data Book | Mississippi Tobacco Data





## Youth Programs

The Partnership for a Healthy Mississippi (PHM) partners with the Office of Tobacco Control to educate Mississippi's youth about the dangers of tobacco use. This is accomplished in two primary ways: the development of RAT (Reject All Tobacco) activities and programs designed for children in grades K-6 and Generation

FREE activities and conferences, designed for youth in grades 7-12. Curriculum is developed and distributed to MTFC's so that youth teams can be established. Additionally, PHM is responsible for RAT Troupe shows for children enrolled in public and private elementary schools (K-6) across the state. In FY 2016-2017, 69 RAT Troupe shows were conducted reaching approximately 23,739 children all around the state (see map 7). Five teachers were selected from each performance to fill out a questionnaire. When asked what they liked best about the performance, teacher responses included:

- The student involvement
- Interaction with students and student knowledge of information
- Live performers, conveying an important message to the students

Five LEAD Conferences were held in October and November 2016. Locations were Hattiesburg, Oxford, Starkville, and Greenwood. iFLY events were held in Hattiesburg, Vicksburg, Oxford, Starkville, and Greenwood.

With over 85,000 students participating in MTFC youth teams in school and community settings, the reach of the Partnership extends beyond the numbers reflected here.

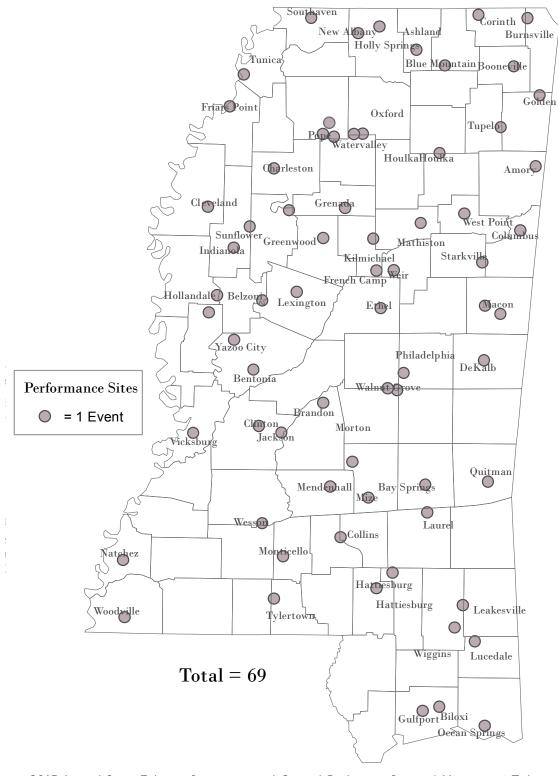


#### The Partnership for a Healthy Mississippi Youth Activities 45,052 youth impacted

- 69 RAT Troupe Performances for 23,739 K-6th graders
- 5 LEAD conferences with 1,064 9th-12th students attending
- 5 iFLY conferences with 809 7th & 8th grade students attending
- 164 FreeStyle Events reaching 17,851 in 7th-12th grade
- 40 RAT Troupe members and 10 YAB members
- Facebook, Instagram, Twitter, and Website users (679)



#### RAT Troupe Performances



Source: 2017 Annual State Tobacco Prevention and Control Evaluation Report | Mississippi Tobacco Data





The Office of Tobacco Control (OTC) collaborates with the Mississippi High School Activities Association (MHSAA) to provide coaches, athletes and spectators with tobacco education in order to help reduce tobacco initiation/prevalence rates with citizens from across Mississippi.

The partnership with OTC and MHSAA focuses on reducing smokeless tobacco rates with MHSAA coaches and athletes. Coaches are very influential in the lives of their athletes and their health choices. MHSAA serves over 600 middle and high schools, approximately 55,000 athletes and over 4,000 coaches. OTC attended conferences and championship games hosted by MHSAA to reach targeted audiences across Mississippi.

The following list contains the various tobacco education delivery methods that were used during MHSAA events:

- On site information table/booth at the Mississippi Association of Athletic Administrators Conference for distribution of information on youth tobacco-prevention programs
- On site information table/booth and Full page ad in Soccer and Basketball Championship game programs
- Tobacco-Free announcements prior to and during each Baseball Championship game at Trustmark Park
- Generation Free 30-second commercial focusing on tobacco usage reduction aired on outfield video board at least twice per game during Football Championship games
- RAT coloring sheet focusing on smokeless tobacco usage reduction included in soccer and baseball game program
- On site information table/booth for Mississippi Tobacco Quitline for distribution of information/incentives to game attendees
- Terrance the RAT mascot on site to interact with youth
- Access to all State Basketball championship games for OTC FREEstyle interactive activities at games
- Access to Trustmark Park for OTC FREEstyle interactive activities at baseball games



Care for Their Air Program is a program for Mississippi child care centers and Head Start centers to educate parents and caregivers about the health risks to children from secondhand smoke exposure. It is also designed to encourage them to commit to providing a smoke-free environment in their homes and cars. An estimated 11 percent of U.S. children ages six years and younger are regularly exposed to secondhand smoke in homes and cars. Exposure to secondhand smoke can cause asthma, increases the risk for Sudden Infant Death Syndrome (SIDS), and leads to increased risk of respiratory infections and middle ear infections.



## Mass-Reach Health Communication Interventions.

The Mississippi State Department of Health, Office of Tobacco Control implemented a statewide media campaign to prevent the initiation of tobacco use among youth and to promote tobacco cessation services among Mississippians.

The CDC's *Best Practices* recommends that an effective state health communication intervention should deliver strategic, culturally appropriate, high-impact messages in sustained and adequately funded campaigns integrated into the overall state tobacco control program. The Office of Tobacco Control (OTC) works with the MSDH Office of Communications to provide a statewide media campaign that builds on existing prevention programs.

- RAT website activities, social media (Facebook), and monthly RAT team binder inserts
- Generation FREE social media (Facebook, Twitter, Instagram, and Snapchat), and monthly FREE team binder inserts
- Rescue Social Change Agency Smokeless Tobacco Campaign, Facebook
- National CDC Tips From Former Smokers Campaign: TV, newspaper, radio, online, and theatres









#### **Rescue Social Change Agency (Rescue)**

In FY17 the Office of Tobacco Control (OTC) continued its partnership with Rescue. Down and Dirty (D&D), the youth tobacco prevention program, continues with its aims of changing what it means to be a Country teen and shifting social norms by breaking the association between tobacco use and the Country culture. D&D specifically targets this peer crowd because prior research indicated Mississippi Country teens are at significantly higher risk of using chewing tobacco and cigarette smoking than their peers. This targeting is completed through social media and event attendance.

Through the use of social media, highly targeted paid digital advertising, and experiential "event" marketing, D&D targets the high-risk Country teen peer crowd with anti-tobacco messages that align with the audience's values, interests, attitudes and beliefs. In FY17, four Message Packages were implemented to communicate a different tobacco-free lifestyle message that aligned with specific Country values. Each message package ran for 5-8 weeks and was supported by a paid social ad campaign. The messages helped to further strengthen the brand's credibility among Country teens while providing better integration of social marketing activities.





#### **D&D** Event Activities and Metrics

D&D has participated in twelve events across the state, including a Demolition Derby near Kiln, two fishing tournaments on the Mississippi coast, and rodeos in Pontotoc and Southaven. In February, D&D attended the annual Dixie National Rodeo in Jackson. The events are staffed by brand ambassadors: young people who embody the Country peer crowd image and live a tobacco-free lifestyle. During the events, these ambassadors interact with local youth to build relationships through the delivery of a tobacco-free lifestyle message.

Event Metric	Total
Total Estimated Event Attendance	78,000
Total Contact Cards Collected	1,553
Total Brand Ambassadors Trained	37
Total Mailing Addresses Collected	1,464
Total Email Addresses Collected	1,435



### Youth Prevention.



#### **The Synar Amendment**

Federal lawmakers passed Section 1926 of Title XIX of the Federal Public Health Service Act, commonly called the Synar Amendment, in 1992. The Synar Amendment requires states to pass and enforce laws that prohibit the sale of tobacco to individuals less than 18 years of age.

The Mississippi Department of Mental Health, Division of Alcohol and Drug Abuse, is the agency responsible for compliance with the Synar Amendment. The Annual Synar Report was submitted to the Substance Abuse and Mental Health Administration Center for Substance Abuse Prevention.



Mississippi is required to provide detailed information on progress made in enforcing youth tobacco access laws and future plans to ensure compliance with the Synar requirements to reduce youth tobacco access rates.



#### The Synar Regulation Requires States To:

- Enforce such laws in a manner that can reasonably be expected to reduce the extent to which tobacco products are available to individuals under the age of 18.
- Have in effect a law prohibiting any manufacturer, retailer, or distributor of tobacco products from selling or distributing such products to any individual under the age of 18.
- Conduct annual random, unannounced inspections to ensure compliance with the law.

  These inspections are to be conducted in such a way as to provide a valid sample of outlets accessible to youth.
- Develop a strategy and time frame for achieving an inspection failure rate of less than 20 percent of outlets accessible to youth.
- Submit an annual report detailing the state's activities to enforce their laws; the state's overall success during the previous fiscal year in reducing tobacco availability to youth; the state's method of conducting inspections and identifying outlets to inspect; and the state's plans for enforcing the law in the coming fiscal year.

For a full copy of the Mississippi Synar Report go to www.dmh.state.ms.us.

#### **State Laws**

In an effort to prohibit the sale of tobacco to minors, *The Mississippi Juvenile Tobacco Access and Prevention Act of 1997* was passed and became effective February 1, 1998. Major provisions included in this legislation were:

- Tobacco retailers must obtain permits to sell tobacco.
- Tobacco retailers must notify their employees of the state tobacco laws.
- Possession of tobacco by minors is illegal.
- Stiff penalties exist for noncompliance by retailers or youth.
- Tobacco vending machines are only permitted in places inaccessible to minors.
- Warning signs are required at each point of sale of tobacco.

Since January 1998, Mississippi state law has authorized the Office of the Attorney General to conduct random, unannounced inspections to ensure compliance with the state statute prohibiting the sale of tobacco to minors. It is the lead enforcement agency involved in enforcing youth alcohol and tobacco laws.



### Protecting the Public.



#### Secondhand Smoke

Secondhand smoke is a serious health hazard. Of the more than 7,000 chemicals it contains, at least 70 are known to cause cancer. Secondhand smoke is classified by the Environmental Protection Agency as a known carcinogen. Exposure to secondhand smoke can lead to heart disease, stroke, decreased immune function, impaired lung function, asthma, ear infections, lower respiratory illness, low birth weight, and sudden infant death syndrome (SIDS). Inhaling secondhand smoke causes approximately 3,000 lung cancer deaths and 46,000 heart disease deaths each year among adult nonsmokers. Secondhand smoke may increase the risk of breast cancer, nasal sinus cavity cancer, and nasopharyngeal cancer in adults and increase the risk of leukemia, lymphoma, and brain tumors in children. The Surgeon General has stated that there is no safe level of exposure to secondhand smoke (Surgeon General Report, 2014).



http://www.surgeongeneral.gov/library/reports/50-years-of-progress/index.html

#### **Developing Municipal Comprehensive Smoke-Free Ordinances In Mississippi**



The Office of Tobacco Control, in collaboration with the Mississippi Municipal League, engaged municipalities within Mississippi to increase the number of individuals in the state protected by comprehensive smoke-free air ordinances.

Through Developing Municipal Comprehensive Smoke-free Ordinances in Mississippi, municipalities worked with tobacco control partners to educate citizens and elected officials about the dangers of secondhand smoke (Appendix II).

The CDC's *Best Practices* recognizes the importance of community support and involvement at the grassroots level in implementing highly effective policy interventions, such as creating smoke-free environments. In 2015, Mississippi received national recognition from Americans for Nonsmokers' Rights for passing the most smoke-free ordinances of any state.



### 2017 • mississippi tobacco data



Key

YEAR LOCAL ORDINANCES DATE IMPLEMENTED % OF MS POP. PROTECTED

2002 | METCALFE | SEPTEMBER 3RD | 0.03%

2002 | METCALFE | SEPTEMBER 3RD | 0.03% 2005 | MAYERSVILLE | SEPTEMBER 16TH | 0.05% 2006 | STARKVILLE | MAY 20TH | 0.91% 2006 | TUPELO | OCTOBER 5TH | 2.21% 2006 | MANTACHIE | NOVEMBER 4TH | 2.24% 2006 | OXFORD | NOVEMBER 16TH | 3.02% 2007 | HATTIESBURG | JANUARY 1ST | 4.59% 2007 | HERNANDO | MARCH 8TH | 5.12% 2007 | ABERDEEN | MARCH 22ND | 5.30% 2007 | MATHISTON | APRIL 15TH | 5.32% 2007 | RIDGELAND | JULY 19TH | 6.14% 2007 | GREENWOOD | AUGUST 16TH | 6.62% 2007 | KOSCIUSKO | NOVEMBER 1ST | 6.86% 2007 | AMORY | NOVEMBER 1ST | 7.10% 2007 | CORINTH | NOVEMBER 6TH | 7.59% 2007 | FLORA | DECEMBER 13TH | 7.66% 2007 | PETAL | DECEMBER 20TH | 8.01% 2008 | ECRU | MARCH 12TH | 8.05% 2008 | PONTOTOC | MAY 1ST | 8.25% 2008 | COLLINS | JUNE 6TH | 8.34% 2008 | CLINTON | AUGUST 14TH | 9.18% 2008 | LAUREL | DECEMBER 4TH | 9.81% 2009 | GRENADA | APRIL 8TH | 10.23% 2009 | HOLLANDALE | DECEMBER 3RD | 10.32% 2010 | MERIDIAN | FEBRUARY 18TH | 11.63% 2010 | BATESVILLE | MARCH 4TH | 11.87% 2010 | BASSFIELD | MARCH 10TH | 11.88% 2010 | PRENTISS | APRIL 17TH | 11.91% 2010 | MADISON | JUNE 3RD | 12.78% 2010 | CRYSTAL SPRINGS | JUNE 15TH | 12.95% 2010 | JACKSON | JULY 1ST | 18.61% 2010 | WESSON | JULY 1ST | 18.67% 2010 | BELZONI | JULY 1ST | 18.74% 2010 | LUMBERTON | JULY 3RD | 18.81%

2010 | SUMRALL | JULY 3RD | 18.87%

2010 | PEARL | SEPTEMBER 1ST | 19.76% 2010 | JONESTOWN | OCTOBER 13TH | 19.80% 2011 | OKOLONA | APRIL 15TH | 19.88% 2011 | CENTREVILLE | APRIL 17TH | 19.94% 2011 | FLOWOOD | MAY 4TH | 20.23% 2011 | MARKS | JULY 14TH | 20.28% 2011 | CALHOUN CITY | SEPTEMBER 1ST | 20.34% 2011 | BROOKHAVEN | NOVEMBER 17TH | 20.75% 2011 | NEW ALBANY | DECEMBER 1ST | 21.05% 2011 | BYRAM | DECEMBER 10TH | 21.43% 2011 | ROLLING FORK | DECEMBER 15TH | 21.50% 2012 | MONTICELLO | JANUARY 18TH | 21.55% 2012 | CANTON | JANUARY 19TH | 22.01% 2012 | GEORGETOWN | MARCH 12TH | 22.02% 2012 | DUNCAN | APRIL 5TH | 22.03% 2012 | ANGUILLA | APRIL 27TH | 22.06% 2012 | DURANT | MAY 3RD | 22.14% 2012 | VERONA | MAY 3RD | 22.24% 2012 | ARCOLA | MAY 10TH | 22.25% 2012 | SHUQUALAK | MAY 31ST | 22.27% 2012 | BOONEVILLE | JUNE 1ST | 22.56% 2012 | NEW AUGUSTA | JUNE 12TH | 22.58% 2012 | MOSS POINT | JUNE 14TH | 23.03% 2012 | SUMNER | JULY 5TH | 23.04% 2012 | ALLIGATOR | JULY 5TH | 23.05% 2012 | FOREST | SEPTEMBER 6TH | 23.24% 2012 | FLORENCE | SEPTEMBER 19TH | 23.35% 2012 | ETHEL | NOVEMBER 1ST | 23.40% 2012 | INDIANOLA | NOVEMBER 7TH | 23.72% 2012 | CARY | DECEMBER 8TH | 23.73% 2013 | MOORHEAD | JANUARY 11TH | 23.81% 2013 | WIGGINS | JANUARY 17TH | 23.96% 2013 | LUCEDALE | FEBRUARY 1ST | 24.06%

2013 | BALDWYN | JULY 5TH | 24.17%

2013 | PLANTERSVILLE | JULY 6TH | 24.21%

AMENDED DEFINITION OF SMOKING TO INCLUDE E-CIGARETTES WITHIN ORIGINAL ORDINANCE.

CREATED A NEW ORDINANCE THAT PROHIBITED E-CIGARETTE USE IN PLACES WHERE ORIGINAL ORDINANCE PROHIBITED SMOKING.

ORIGINAL ORDINANCE INCLUDED E-CIGARETTES.



key

YEAR LOCAL ORDINANCES DATE IMPLEMENTED % OF MS POP. PROTECTED 2002 SEPTEMBER 3RD METCALFE

2013 | PASCAGOULA | JULY 18TH | 24.95% 2013 | MORTON | OCTOBER 31ST | 25.06% 2013 | MAGEE | NOVEMBER 19TH | 25.21% 2013 | WALNUT | DECEMBER 5TH | 25.23% 2013 | WOODVILLE | DECEMBER 30TH | 25.27% 2014 | BRUCE | JANUARY 1ST | 25.33% 2014 | FRIARS POINT | JANUARY 8TH | 25.36% 2014 | ITTA BENA | JANUARY 16TH | 25.43% 2014 | FARMINGTON | FEBRUARY 20TH | 25.50% 2014 | LOUISVILLE | APRIL 3RD | 25.71% 2014 | MENDENHALL | APRIL 4TH | 25.80% 2014 | DUCK HILL | APRIL 9TH | 25.84% 2014 | WEIR | APRIL 10TH | 25.86% 2014 | NOXAPATER | MAY 1ST | 25.87% 2014 | SLEDGE | JUNE 4TH | 25.89% 2014 | COAHOMA | JULY 3RD | 25.90% 2014 | PICAYUNE | JULY 17TH | 26.25% 2014 | SOUTHAVEN | AUGUST 4TH | 28.04% 2014 | CRAWFORD | SEPTEMBER 2ND | 28.06% 2014 | BEULAH | SEPTEMBER 4TH | 28.07% 2014 | ISOLA | SEPTEMBER 4TH | 28.09% 2014 | CLARKSDALE | SEPTEMBER 10TH | 28.63% 2014 | POPLARVILLE | NOVEMBER 5TH | 28.73% 2014 | SENATOBIA | NOVEMBER 20TH | 29.00% 2015 | IUKA | JANUARY 1ST | 29.10% 2015 | NETTLETON | FEBRUARY 5TH | 29.16% 2015 | SIDON | FEBRUARY 5TH | 29.18% 2015 | CHARLESTON | MARCH 7TH | 29.25% 2015 | MEADVILLE | MARCH 12TH | 29.26% 2015 | TUTWILER | APRIL 2ND | 29.30% 2015 | COURTLAND | APRIL 2ND | 29.32% 2015 | DREW | APRIL 2ND | 29.37% 2015 | WALNUT GROVE | APRIL 3RD | 29.43% 2015 | PITTSBORO | MAY 5TH | 29.43%

2015 | FAYETTE | JUNE 11TH | 30.28% 2015 | BROOKSVILLE | JULY 2ND | 30.32% 2015 | STATE LINE | JULY 2ND | 30.34% 2015 | PICKENS | JULY 2ND | 30.38% 2015 | EDEN | AUGUST 13TH | 30.38% 2015 | MACON | SEPTEMBER 17TH | 30.47% 2015 | SALTILLO | SEPTEMBER 18TH | 30.63% 2015 | HOLLY SPRINGS | OCTOBER 1ST | 30.89% 2015 | LOUISE | OCTOBER 1ST | 30.90% 2015 | LYON | OCTOBER 2ND | 30.91% 2015 | LEXINGTON | OCTOBER 11TH | 30.96% 2015 | SHAW | OCTOBER 30TH | 31.02% 2015 | ELLISVILLE | NOVEMBER 5TH | 31.17% 2015 | SHUBUTA | DECEMBER 2ND | 31.19% 2015 | LULA | DECEMBER 4TH | 31.20% 2016 | DIAMONDHEAD | JANUARY 2ND | 31.47% 2016 | COLDWATER | MARCH 3RD | 31.52% 2016 | LEAKESVILLE | MARCH 3RD | 31.56% 2016 | CRUGER | APRIL 6TH | 31.57% 2016 | ARTESIA | MAY 5TH | 31.58% 2016 | TCHULA | AUGUST 13TH | 31.65% 2016 | HOUSTON | SEPTEMBER 1ST | 31.77% 2016 | SEBASTOPOL | SEPTEMBER 1ST | 31.77% 2016 | RENOVA | SEPTEMBER 2ND | 31.80% 2016 | MAGNOLIA | SEPTEMBER 6TH | 31.88% 2016 | UTICA | SEPTEMBER 8TH | 31.91% 2016 | WOODLAND | NOVEMBER 3RD | 31.91% 2016 | EDWARDS | DECEMBER 14TH | 31.94% 2017 | OAKLAND | MARCH 9TH | 31.96% 2017 | WEBB | MARCH 9TH | 31.98% 2017 | SUMMIT | MARCH 16TH | 32.03% 2017 | QUITMAN | MARCH 23RD | 32.11% 2017 | ROXIE | JULY 6TH | 32.12%

2017 | NOXUBEE COUNTY | JUNE 24TH | 0.23%

2015 | BRANDON | JUNE 3RD | 30.23%

CREATED A NEW ORDINANCE THAT PROHIBITED E-CIGARETTE USE IN PLACES WHERE ORIGINAL ORDINANCE PROHIBITED SMOKING.

ORIGINAL ORDINANCE INCLUDED E-CIGARETTES.

AMENDED DEFINITION OF SMOKING TO INCLUDE E-CIGARETTES WITHIN ORIGINAL ORDINANCE.

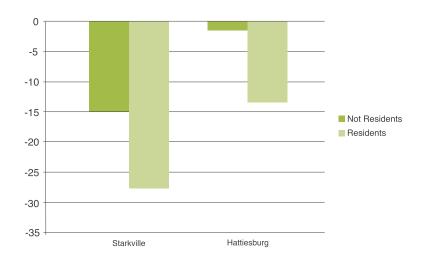
Source: June 2017 100% Smoke-Free Communities in Mississippi Factsheet | Mississippi Tobacco Data

#### The Starkville & Hattiesburg Heart Attack Studies

REDUCTIONS IN HEART ATTACK ADMISSIONS FOLLOWING
THE IMPLEMENTATION OF LOCAL SMOKE-FREE ORDINANCES



- STARKVILLE | 27.7% REDUCTION IN HEART ATTACK
   ADMISSIONS, COST SAVINGS OF \$288, 270.
- HATTIESBURG | 13.4% REDUCTION IN HEART ATTACK
   ADMISSIONS, COST SAVINGS OF \$2,367,909.



Starkville implemented a comprehensive smoke-free ordinance that prohibited smoking inside of all indoor public places on May 20, 2006. Seven months later, Hattiesburg implemented a similar comprehensive ordinance on January 1, 2007.

Findings from controlled observational studies demonstrate that hospital admissions for heart attacks in both Starkville and Hattiesburg decreased substantially following the implementation of the smoke-free ordinances. Moreover, the observed decrease in these communities was much higher than that observed in control communities that did not have a smoke-free ordinance.

Source: January 2012 Starkville & Hattiesburg Heart Attack Studies Factsheet | Mississippi Tobacco Data



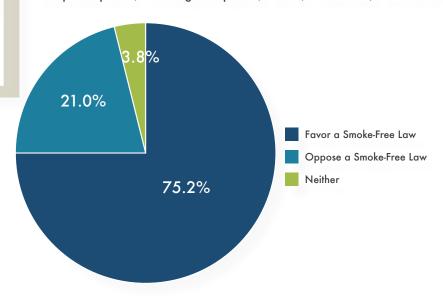
### 2016 Mississippi Social Climate Survey of Tobacco Control

SUPPORT FOR SMOKEFREE AIR | MARCH 2017

Results from the most recent Social Climate Survey demonstrate strong support for smoke-free air in Mississippi.

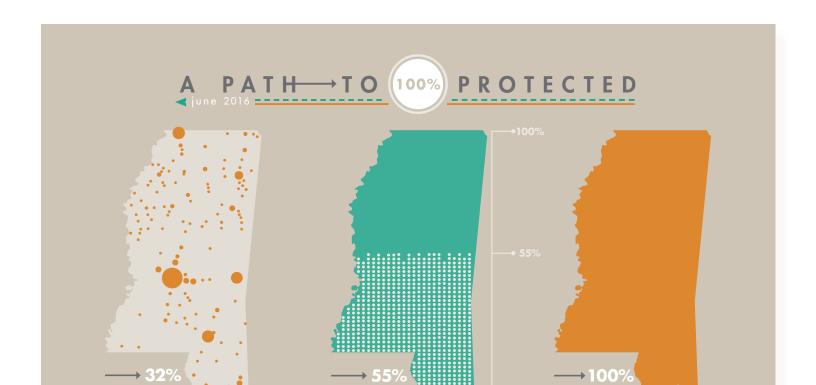
- More than three-quarters of Mississippi adults (75.2%) favor a state law prohibiting smoking in most indoor places, including workplaces, public buildings, offices, restaurants, & bars.
  - Only 21.0% of Mississippi adults oppose a state law.
  - 52.1% of smokers support a state law compared to only 42.9% who are opposed.
  - Republicans (79.5%) and Democrats (75.5%) are equally supportive of a state law.

Would you favor or oppose a law in Mississippi prohibiting smoking in most public places, including workplaces, offices, restaurants, and bars?



Source: 2016 Mississippi Social Climate Survey of Tobacco Control Mississippi Tobacco Data





Source: June 2016 100% Smoke-Free Communities in Mississippi Factsheet Mississippi Tobacco Data

If every Mississippi municipality passed a comprehensive smoke-free ordinance, only 55% of Mississippians would be protected. The rest live in rural areas outside of municipalities.

As of June 21, 2016, 123 municipalities in Mississippi have implemented comprehensive, smoke-free ordinances. These ordinances

protect 32% of Mississippi.

The only way to protect all Mississippians is to pass a state-wide comprehensive smoke-free law.

### Surveillance & Evaluation.

The Office of Tobacco Control implements an annual surveillance and evaluation system, as recommended by the CDC's Best Practices, to monitor and provide shortterm, intermediate, and long-term intervention outcomes. The data is used to influence program and policy direction, ensure accountability, and demonstrate effectiveness.

Collecting baseline data related to each objective and performance indicator is critical to ensuring that program-related effects can be clearly measured. Surveillance and Evaluation services are provided by the Mississippi State University (MSU) Social Science Research Center (SSRC).

Surveillance efforts are designed to measure and detail progress toward goals using numerous primary and secondary data sources. These data sets include the:

- Mississippi Youth Tobacco Survey
- Youth Risk Behavior Surveillance System
- Mississippi University Student Survey of Tobacco Control
- Mississippi Social Climate Survey of Tobacco Control
- Behavioral Risk Factor Surveillance System

The Tobacco Control Unit of the MSU SSRC administers the following surveys:

- Mississippi Social Climate Survey of Tobacco Control
- Mississippi Youth Tobacco Survey
- Mississippi University Student Survey of Tobacco Control

In addition, this unit maintains a website that serves four primary functions:

- Serves as a repository for reports, slides, and fact sheets generated by the evaluation and surveillance efforts, and provides supporting links and references for tobacco control data
- Serves as an interactive programmatic data collection mechanism for evaluation efforts
- Contains a data query module that allows visitors to generate interactive tables from primary data
- Contains several interactive charts that provide vivid illustration of the profound changes states have experienced after raising their state cigarette tax or passing statewide smoke-free laws.

The recent Surveillance and Evaluation Report, along with other state specific tobacco control surveillance and evaluation data, can be accessed at www.mstobaccodata.org.

# Appendix I. (Tobacco Control Advisory Council)

The Mississippi Tobacco Control Advisory Council consists of 13 members who are appointed by state and university officials. The Mississippi Tobacco Control Advisory Council has maintained an active role in the development and implementation of the programs within the Office of Tobacco Control.

TOBACCO CONTROL ADVISORY COUNCIL						
Name	Location	Affiliation/Appointment				
Berthold "Bert" Beisel, MD	Columbia	Governor Appointment				
Mohammad Shahbazi, PhD	Jackson	Jackson State University/ School of Public Health				
"Bob" K. Collins, MD	MS State University	American Lung Association Appointment				
Nancy Collins, Senator	District 6 Lee, Pontotoc	State Senate/ Lieutenant Governor				
Scott Clements	Jackson	State Director, Office of Healthy Schools, MS Department of Education				
Gena Vail	New Albany	MS Nurses Association/ Lt. Governor Appointment				
Michael Forster, PhD	Hattiesburg	University of Southern MS Appointment				

<sup>\*</sup> Vacant council positions are being reviewed and reappointed.



### (Mississippi Tobacco-Free Coalitions)

Itawamba

Copiah and Lincoln

#### **Fiscal Agent**

Adams County Coalition for Children and Youth Aiming for Healthy Families American Lung Association, Southeast Chapter Caffee Caffee & Associates Community Educational Support Systems of MS Delta Health Alliance

Montgomery Institute
Grenada County School District
Innovative Behavioral Services
Lawrence County School District
Washington County Planning Department
Mississippi Community Education Center

Family Resource Center of Northeast MS

National Council on Alcoholism and Drug Dependence Northeast Mississippi Healthcare New Beginning Ministries North Delta Planning and Development District Partnership for a Healthy Mississippi

Olive Branch Family YMCA

#### **County/Counties**

Adams, Jefferson, and Franklin
Alcorn, Tippah, Prentiss, and Tishomingo
Hancock, Jackson, Pearl River, and Harrison
Forrest, Jones, Perry, Covington, Smith, Lamar, and Marion
Wayne, Clarke, and Jasper
Coahoma, Tunica, Bolivar, Sunflower, Quitman, and
Tallahatchie
Noxubee, Kemper, and Neshoba
Grenada, Yalobusha, and Calhoun
Lauderdale, Newton, Hinds, Rankin, Scott, and Simpson
Lawrence, Jefferson Davis, and Walthall
Washington, Sharkey, and Issaquena
Montgomery, Choctaw, Webster, Claiborne, Warren,
Attala, Winston, and Leake

Union, Benton, and Marshall
George, Green, and Stone
Panola, Lafayette, and Pontotoc
Madison, Yazoo, Holmes, Leflore, Carroll, Humphreys,
Pike, Amite, and Wilkinson
Desoto and Tate

Oktibbeha, Lowndes, Clay, Lee, Monroe, Chickasaw, and

